

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

1240-G SKILLED NURSING AND LICENSED HEALTH AIDE SERVICES

REVISION DATE: **MM/DD/YYYY**, 09/14/2022, 6/9/2021, 7/3/2015,
9/15/2014

EFFECTIVE DATE: June 30,1994

REVIEWED DATE: 09/06/2023

REFERENCES: 42 C.F.R. 440.80, A.R.S. § 32-1601, A.R.S. §36- 2939, AMPM
1020, AMPM 1620-D, AMPM 1240-G, AMPM 1250-D, AMPM 310-I, AMPM 520

PURPOSE

The purpose of this policy is to establish the requirements regarding
medically necessary Home Nursing and Licensed Health Aide Services for
Division Members who are eligible for Arizona Long Term Care System
(ALTCS) services.

DEFINITIONS

1. "Activities of Daily Living" or "ADLs" means activities a Member shall perform daily for the Member's regular day-to-day necessities, including but not limited to mobility, transferring, bathing, dressing, grooming, eating, and toileting.
2. "H-NAT" means the Hourly Nursing Assessment Tool that is used to analyze and display the relationship between the Skilled

27
28

Nursing task and the necessary time to complete the task.

29
30

31 3. "Home" means the Member's place of residence, that is not a
32 medical setting, which may include: a private home, group
33 home, Adult Developmental Home (ADH), and a Child
34 Development Home (CDH).

35 4. "Intermittent Nursing Services" means Skilled Nursing Services
36 provided by either a Registered Nurse (RN) or Licensed Practical
37 Nurse (LPN), for Visits of two hours or less in duration, up to a
38 total of four hours per day.

39 5. "Inter-rater Reliability" or "IRR" means the process of ensuring
40 that multiple observers are able to consistently define a situation
41 or occurrence in the same manner, which is then recorded.

42 1. "Licensed Health Aide" or "LHA" means pursuant to A.R.S. §
43 32-1601, a person who is licensed to provide or assist in
44 providing nursing-related services pursuant to A.R.S. § 36-2939
45 or and:

46 a. Is the parent, guardian, or family member of the Arizona

- 47
48
49 Long Term Care System (ALTCS) Member who is under 21
50 years of age and eligible to receive receiving Skilled
51 Nursing or Skilled Nursing respite care services who may
52 provide Licensed Health Aide (LHA) services only to that
53 Member and only consistent with that Member's plan of
54 care; and
- 55 b. Has a scope of practice that is the same as a Licensed
56 Nursing Assistant (LNA) and may also provide medication
57 administration, tracheostomy care, enteral care and
58 therapy, and any other tasks approved by the State Board
59 of Nursing in rule.
- 60 6. "Member" means the same as "Client" as defined in A.R.S. §
61 36-551. ~~means an individual who is receiving services from the~~
62 ~~Division of Developmental Disabilities (Division).~~
- 63
64 7. "Planning Team" means a defined group of individuals comprised
65 of the Member, the Responsible Person if other than the Member,
66 and, with the Responsible Person's consent, any individuals

- 67
68
69 important in the Member’s life, including extended family
70 members, friends, service providers, community resource
71 providers, representatives from religious/spiritual organizations,
72 and agents from other service systems. ~~means a group of~~
73 defined individuals including:
- 74 a. ~~— The Member;~~
75
76 b. ~~— A Responsible person;~~
77
78 c. ~~— The Support Coordinator;~~
79
80 d. ~~— Other State of Arizona Department of Economic Security~~
81 ~~staff, as necessary; and~~
- 82 e. ~~— Any persons of responsible age and capacity selected by~~
83 ~~the Member, Responsible Person or Division.~~
- 84 8. “Pro Re Nata” or “PRN” means medications that are provided as
85 needed and not on a regular basis.
- 86 9. “Responsible Person” means the parent or guardian of a minor
87 with a developmental disability, the guardian of an adult with a

88
89

90 developmental disability or an adult with a developmental
91 disability who is a member or an applicant for whom no guardian
92 has been appointed.

93 10. “Skilled Nursing Care” or “Skilled Nursing Services” means a
94 level of care that includes services that can only be performed
95 safely and correctly by a licensed nurse (either a Registered
96 Nurse or a Licensed Practical Nurse).

97 11. “Support Coordinator” means the same as “Case Manager” under
98 A.R.S. § 36-551.
99

100
101 12. “Visit” means one unit of LHA services. One unit is 15 minutes
102 long. A Visit is usually two hours but may be greater or lesser
103 depending on the time it takes to render the procedure.

104

105

106 **POLICY**

107

108 **A. SKILLED NURSING SERVICES**

109

110 1. The Division shall cover medically necessary Skilled Nursing
111 Services provided by a Registered Nurse (RN) or Licensed

- 112
113
114 Practical Nurse (LPN) in the Member's Home. ~~Services may~~
115 ~~include patient care, coordination, facilitation, and education.~~
- 116 2. The Division shall ensure that if the Skilled Nursing Services are
117 furnished by an LPN, the services are ~~shall be~~:
- 118 a. Provided under the supervision and direction of an RN or
119 Physician, and
- 120 b. Provided by a LPN ~~shall be~~ that is employed by a Home
121 Health Agency (HHA).
- 122 3. The Division shall provide Skilled Nursing Services as an
123 alternative to hospitalization or institutionalization when care
124 cannot be safely managed within the scope and standards of
125 Intermittent Nursing Services care and when the Division
126 ~~determines~~ the services to be cost-effective.
- 127 4. The Division shall ensure that Skilled Nursing Services are
128 provided by a:
- 129 a. Medicare certified HHA; or
130
131 b. State licensed HHA if a Medicare certified HHA is not

132
133

134 available per AMPM 310-I.

135
136

5. Support Coordinators shall identify Members who potentially need Skilled Nursing Services through the Person Centered Service Plan and shall submit a referral to Health Care Services for an assessment by the District Nurse when skilled nursing needs are identified.

137

138

139

140

141

6. The District Nurse, upon receipt of the referral from the Support Coordinator, shall complete a nursing assessment, which ~~includes~~ contains:

142

143

144

- a. A review of the current medical files, including all pertinent health-related information, to identify potential health needs of the Member related to the Division nursing assessment and;

145

146

147

148

- b. Assessment of the health status of the Member by a review of the current medical data, communication with the Member, team members and families, and assessment of the Member in relation to physical, developmental, and

149

150

151

152
153

behavioral dimensions.

154

155

156

7. The District Nurse shall determine allocation of Skilled Nursing Care hours based on the nursing needs identified on the Division nursing assessment and the H-NAT Tool.

157

158

159

8. The District Nurse shall complete each section of the H-NAT to evaluate the needs of the Member requiring Skilled Nursing Services.

160

161

162

9. The Division shall not cover Skilled Nursing Services for the sole purpose of helping with ~~Activities of Daily Living~~ ADLs.

163

164

10. The Division ~~but may~~ shall cover ADLs when nursing providers assist Members ~~with ADLs~~ while they are on duty and providing authorized Skilled Nursing Services.

165

166

167

11. When PRN Skilled Nursing Services are assessed, the District Nurse shall describe in detail the medical need in the nursing assessment.

168

169

170

12. The District Nurse shall ensure that assessed services are

- 171
172
- 173 provided to the Member within 14 calendar days for an existing
174 ALTCS Member or 30 days for a newly enrolled ALTCS Member.
- 175 13. The Division shall ensure Skilled Nursing Services are ordered by
176 a Physician. ~~and ensures the following entities provide them:~~
- 177 14. The District Nurse shall ensure the HHA obtains an order from
178 the Physician to perform duties related to Skilled Nursing Care if
179 an order is not already in place.
- 180 15. The Division shall require the HHA to ensure that the Physician
181 reviews and recertifies the plan of care at least every 60 days
182 and that it is reviewed at every Person Centered Service Plan
183 meeting.
- 184 16. The Division shall require the HHA to ensure that a Physician
185 prescribes the services and the Skilled Nursing Services follow a
186 written nursing plan of care developed by the Division contracted
187 Home Health provider, in conjunction with the Division's Support
188 Coordinator, the Member or Responsible Person, and the District
189 Nurse that includes:

- 190
191
- 192 a. Specific services to be provided,
- 193
194 b. Anticipated frequency and duration of each specific
195 service;
- 196 c. Expected outcome of services;
- 197
198 d. Coordination of these services with other services being
199 received or needed by the Member;
- 200 e. Input of the Member or Responsible Person; and
- 201
202 f. Assisting the Member in increasing independence.
- 203
204 13. District Nurses shall ensure care is delivered by the Member's
205 Skilled Nursing Service providers.
- 206 14. ~~Every 90 days,~~ the District Nurses shall conduct ongoing
207 assessment and monitoring of the nursing needs and Skilled
208 Nursing Services of each Member assigned to their caseload
209 every 90 days.
- 210 15. ~~If a Member is receiving Skilled Nursing Services,~~ The Support

- 211
212
- 213 Coordinator shall invite the District Nurse to all Planning Team
214 meetings if a Member is receiving Skilled Nursing Services,
215 unless otherwise requested by the ~~Member or~~ Responsible
216 Person.
- 217 16. District Nurses shall work in collaboration with the Member's
218 Planning Team to ensure that all Skilled Nursing ~~Member~~ needs
219 are met and all services are medically necessary and
220 cost-effective.
- 221 17. The District Nurse shall document any contact made on behalf of
222 the Member related to Skilled Nursing Services in the Member's
223 progress notes.
- 224
- 225 18. At least annually, the Division shall train District Nurses and
226 nurse managers on the ~~Hourly Assessment Tool~~ H-NAT.
- 227 19. At least annually, Nurse Managers will conduct ~~Inter-Rater~~
228 Reliability IRR testing to ensure consistent application of review
229 criteria in making medical necessity decisions.

230
231

232 **B. LICENSED HEALTH AIDE (LHA)**

233
234

1. The Division shall cover medically necessary LHA services in the setting where the Member's normal life activities take place when provided by an HHA.

235

236

237

2. The Division shall provide LHA services as an alternative to hospitalization or institutionalization when care cannot be safely managed within the scope and standards of Intermittent Nursing Services care and when determined to be cost-effective.

238

239

240

241

3. The Division shall require Visits include at least one of the following components:

242

243

- a. Monitoring the health and functional level, and assistance with the development of the HHA plan of care for the Member;

244

245

246

- b. Monitoring and documenting of Member vital signs, as well as reporting results to the supervising RN or Physician;

247

248

- c. Providing Members with personal care;

249

250

- d. Assisting Members with bowel, bladder or ostomy

251
252

programs, as well as catheter hygiene (does not include catheter insertion);

- e. Administering, or assisting Members with self-administration of, medications;
- f. Assisting Members with eating, if required, to maintain sufficient nutritional intake, and providing information about nutrition;
- g. Assisting Members with routine ambulation, transfer, use of special appliances or prosthetic devices, range of motion activities or simple exercise programs;
- h. Assisting Members in ~~Activities of Daily Living~~ ADLs to increase Member independence;
- i. Teaching Members and families how to perform home health tasks; and
- j. ~~Observation~~ and reporting to the HHA Provider or the Support Coordinator of Members who exhibit the need for

- 253
254
- 255 additional medical or psychosocial support, or a change
256 ~~(decline or improvement)~~ in condition during the course of
257 service delivery.
- 258 4. The District Nurse shall determine allocation of LHA services
259 based on the nursing needs identified on the Division nursing
260 assessment and the H-NAT Tool.
- 261 5. The District Nurse ~~may~~ shall allocate LHA services in lieu of
262 Skilled Nursing hours when skilled services fall within the scope
263 of the LHA.
- 264 6. The Division shall ensure that Skilled Nursing ~~service~~ Services,
265 respite services provided by a RN or LPN, and LHA services are
266 not provided concurrently.
- 267 7. The Division shall ensure that when LHA services are authorized
268 for respite, the LHA is not the same individual for whom the
269 respite is intended. ~~Refer to AMPM 1250-D for additional respite~~
270 ~~information.~~
- 271 8. The Division shall ensure LHA services are provided under the

- 272
273
- 274 supervision and direction of a RN or Physician.
- 275
276 9. The Division shall ensure the supervision of LHAs includes
277 observing the LHA's competency in performing the necessary
278 duties as required by the individual patient.
- 279 10. The Division shall ensure ~~and~~ supervisory Visits ~~shall occur~~
280 within the LHAs first week and:
- 281 a. ~~Again w~~Within the first 30 days,
282
283 b. ~~Again w~~Within the first 60 days, and
284
285 c. At least every 60 days thereafter.
- 286
287 11. The Division shall ensure that LHAs are employed by an HHA and
288 licensed by the State Board of Nursing.
- 289 12. The Division shall ensure that LHA Services are provided through
290 a Medicare Certified HHA.
- 291 13. The Division shall ensure that the Division rate book and claims
292 manual reflect information on billing for LHA services.

293
294
295
296

Signature of Chief Medical Officer: